

# UPSTATE

UNIVERSITY HOSPITAL

SYRACUSE, NEW YORK

**CONSTRUCTION HAS BEGUN ON  
UPSTATE'S NEW CANCER CENTER,  
SCHEDULED TO OPEN IN 2013.**

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**May 2011**

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UPSTATE Cancer Center

# UPSTATE

CANCER CENTER



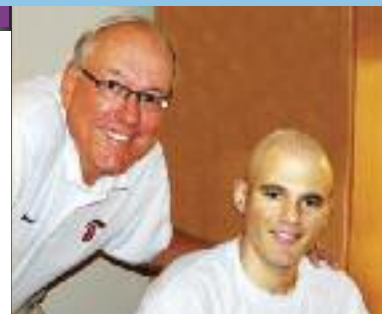
A beautiful physical expression of what is already the region's most comprehensive resource for the diagnosis and treatment of cancer and related disorders. Rendering courtesy Ewing Cole Architects, Philadelphia.

## CONSTRUCTION BEGINS ON UPSTATE CANCER CENTER

Construction of the new Upstate Cancer Center began in March with the upgrading of underground utilities, a process that will take the greater part of 2011 to accomplish. This represents the first phase of construction on the \$74.5 million center that will bring Upstate's outpatient cancer services — for adults and children — under one roof. The center will feature dedicated spaces that support holistic care and serve as a vital component to the Upstate Cancer Research Institute. The five-story, 90,000-square-foot center is adjacent to the hospital and will open in September 2013.

"Give Hope a New Home," a capital fundraising campaign, seeks to raise \$15 million toward the construction and programmatic endowments for the center. At the time of publication, \$6 million had been raised. Campaign proceeds will support adult medical oncology, children's oncology, surgical oncology, radiation oncology and the Upstate Cancer Research Institute. To learn how you can help or make a pledge, contact 315-464-HOPE (4673), or [www.upstate.edu/cancercenter](http://www.upstate.edu/cancercenter)

Syracuse University basketball coach Jim Boeheim (top right) and Buffalo Sabres star Tim Connolly (at right) serve as honorary co-chairs of the "Give Hope a New Home" campaign. They are pictured visiting Upstate patients.





Jeffrey Bogart

Irene Cherrick

Chung Chung

Thomas Coyle

David Duggan

Teresa Gentile

Stephen Graziano



Dilip Kittur

Leslie Kohman

Sheila Lemke

Bernard Poiesz

Ernest Scalzetti

Richard Sills

Jonathan Wright

# FOURTEEN UPSTATE DOCTORS VOTED BEST IN CANCER CARE

**If you or a loved one needed a doctor in your specialty, and you couldn't treat the person yourself, to whom would you refer them?**



**T**hat is the question posed to physicians by Best Doctors Inc., a leading medical field research service that identifies board-certified physicians who are recommended by their peers as being the best in their specialty areas. Close to 100 Upstate doctors, from 42 specialty areas, are on the list.

The 2010-2011 Best Doctors list includes 14 Upstate oncologists – 83 percent of the region's "Best Doctors" who provide care for cancer patients. They are Jeffrey Bogart MD, radiation oncology; Irene Cherrick MD, pediatric hematology/

oncology; Chung Chung MD, radiation oncology; Thomas Coyle MD, medical oncology; David Duggan MD, medical oncology; Teresa Gentile MD/PhD, medical oncology; Stephen Graziano MD, medical oncology; Dilip Kittur MD, surgery; Leslie Kohman MD, FACS, thoracic surgery and medical director, Upstate Cancer Center; Sheila Lemke MD, medical oncology; Bernard Poiesz MD, medical oncology; Ernest Scalzetti MD, radiology; Richard Sills MD, pediatric hematology/oncology; and Jonathan Wright MD, medical oncology. ■



Tom Quinn, president and chief executive officer of Community General Hospital, left, and John McCabe, MD, CEO of Upstate University Hospital

## PROGRESS REPORT: UPSTATE'S ACQUISITION OF COMMUNITY GENERAL HOSPITAL

**F**or a number of years, Community General Hospital in Syracuse has experienced increasing financial difficulties as well as a shrinking market share. In spring 2010, Community General and Upstate University Hospital entered into talks and later that year a full asset acquisition was put in motion. In March 2011, Upstate submitted a Certificate of Need (CON)\* with the New York State Department of Health which began the formal approval process for the acquisition.

“This brings us closer to building a unified healthcare system with a unified workforce, and strengthens our ability to develop a comprehensive healthcare system for the

benefit of patients throughout the region,” said John McCabe MD, chief executive officer of Upstate University Hospital.

Tom Quinn, president and chief executive officer of Community General Hospital, said, “The CON affirms that Upstate seeks to build upon CGH’s reputation and history and to provide employment opportunities for substantially all of CGH employees. With Upstate as a partner, our physicians and work force will continue to provide the quality care for which we are known.”

Upstate and CGH will operate as one hospital with two campuses with a total bed size not to exceed 715. (Currently, Upstate has 409 beds and CGH has

*\*New York’s CON process governs the establishment, construction, renovation and major medical equipment acquisitions of health care facilities, such as hospitals, nursing homes, home care agencies, and diagnostic and treatment centers.*

## Details of the Deal

- ♦ Upstate will purchase almost all of CGH's assets and real property. Upstate will not assume any long-term debt of CGH, which CGH will pay off before the acquisition process is complete. Assets include the main hospital building and related structures, including the Physician's Office Building on the CGH campus.
- ♦ Upstate will assume some CGH liabilities, most notably accounts payable, assumed employee obligations and net pension plan liability.
- ♦ Upstate will not assume such CGH liabilities as bond, debt and mortgage, post-retirement benefit plan, workers' compensation and some excluded employee costs.

306.) Upstate will operate CGH under the existing license of Upstate University Hospital.

When clinical planning is complete, the total number of licensed beds is expected to decline. "We are discussing ways that we may reconfigure beds between the two facilities to provide the greatest benefit to patients," Dr. McCabe said.

For example, between both facilities there are 50 inpatient beds for physical medicine and rehabilitation. "There may be a better way to realign these beds to benefit patients and better utilize resources," said Dr. McCabe. "Reconfiguration may provide opportunities to explore space for long sought-after services, such as inpatient pediatric psychiatric care.

Support for the acquisition has come from the CNY Health Systems Agency, Hospital Executive Council, SUNY Board of Trustees, Upstate Council and the Affiliation Council.

"We've been pleased by the feedback this proposal has generated, especially within the healthcare marketplace," Dr. McCabe said. "We all understand that CGH is a significant piece of the healthcare system. We believe we have found a way to leverage its outstanding care, workforce and tradition and to build a more robust healthcare system for the region."

The Office of the State Comptroller and the Office of the Attorney General also must approve the acquisition. It is anticipated that by July 1, 2011, all agreements will be signed and approved, enabling the acquisition to take place. For more information, go to [www.cgh-upstate.org/site/](http://www.cgh-upstate.org/site/) ■

## Key Benefits

- ♦ It is a cost-effective solution to Upstate's need for additional space. Construction costs for building new healthcare space are significant and construction of additional new clinical space seems unlikely. (Exception: The Upstate Cancer Center, already under construction.) The acquisition of Community General Hospital provides Upstate with a viable option to meet the increasing demand for services without a significant increase in capital costs.
- ♦ It will improve patient access and reduce emergency department diversion. Despite efforts to reduce diversion, Upstate still must divert ambulances to other hospitals (almost one in four in 2010). Upstate also has had to decline transfers from other facilities. With the acquisition of CGH, additional beds will be available that will improve patient access and allow for decompression of area emergency departments.
- ♦ It will further primary care and teaching needs of the region. Upstate will be able to pursue the expansion of a variety of educational programs.
- ♦ It will ensure that an acute care hospital will continue to serve the southwest regions of Syracuse. Without the acquisition, CGH faces an uncertain future and would likely cease operations. Such a move would deprive patients access to health services, adversely impact area hospitals, and result in the loss of 1,000 jobs.

## UPSTATE EARNS PRIMARY STROKE CENTER CERTIFICATION



**U**pstate University Hospital is the first hospital in New York state to achieve certification as a DNV\* Primary Stroke Center Hospital, and the only one in Central New York to earn the designation. In addition, the hospital has received accreditation by DNV's National Integrated Accreditation for Healthcare Organization (NIAHO) program.

### Unannounced Reviews

DNV surveyors conduct annual, unannounced reviews of all hospital areas, not just clinical settings, to ensure that quality care is integrated into the core processes of running a hospital. Surveyors collaborate with hospital staff to promote the discovery of new and innovative ways to deliver quality healthcare services that specifically meet the needs of each hospital's patient populations.

In addition, DNV's hospital accreditation program is the only one of its kind to integrate International Standardization Organization (ISO) guidelines that relate to quality management systems and are designed to help organizations ensure that they meet the needs of their customers and other stakeholders.

### Using Highest Standards

DNV Healthcare certified Upstate University Hospital as a Primary Stroke Center (PSC),

signifying that the hospital—through its Upstate Stroke Center— is using the highest standards and proven methods to achieve successful outcomes for stroke patients.



To achieve this certification, DNV surveyors reviewed actual and potential patient outcomes, as well as required processes. They assessed the care and services provided at Upstate, including the appropriateness of the care and services within the context of the certification requirements.

### Inpatient and Outpatient Assessments

Surveyors visited a variety of patient care settings associated with stroke care, including inpatient and outpatient units, emergency departments, imaging, rehabilitation and remote locations, as well as reviewed clinical records, staff records and other documentation.

Upstate's Stroke Center has been recognized previously for its stroke care. Last year, it earned the Stroke Gold Performance Achievement Award from the American Stroke Association. In 2006, Upstate University Hospital became Central New York's first hospital to receive Stroke Center Designation from the New York State Department of Health, a distinction it continues to hold. ■

*\*DNV Healthcare is the newest hospital accrediting agency in the nation and the first agency in more than 40 years to be accredited by the Centers for Medicare and Medicaid Services (CMS) as a new hospital accrediting program.*



Tashiko Melendez and her son, Joseito. Heart surgeon Charles Lutz MD of the Upstate Heart and Vascular Center.

## RIGHT PLACE, RIGHT TIME

**S**yracusan Tashiko Melendez was eight months pregnant with her second child when she woke up with chest and back pains. At that moment, she had no idea that baby Joseito's birth was just hours away and that an Upstate heart surgeon would save her life.

As the day wore on, Tashiko's pains grew worse. The ER became her only option. While initial tests showed a normal heart beat and no problems with the baby, a sonogram of her chest revealed the source of her pain...a life-threatening tear in her aorta, the main artery to her heart.

Upstate heart surgeon Charles Lutz MD was summoned to consult with Tashiko's doctors. All agreed that Tashiko first needed an emergency C-section to be followed immediately by open-heart surgery. Both procedures were done at Upstate, and a few days later an exhausted but thankful Tashiko was reunited with her son.

"Aortic tears are not uncommon," said Dr. Lutz, but they are rare during pregnancy. They always need urgent surgical treatment," he emphasized, "and they are often associated with uncontrolled high blood pressure."

In a matter of hours, a baby was born, a heart was repaired and a mother was given a new lease on life. Just one week after that harrowing day, mom and baby were home with dad and big brother. And Tashiko began a new routine of monitoring her blood pressure.

"I feel like a celebrity when I go to Upstate for follow ups," said Tashiko. "People are fascinated by the woman who had a baby and open-heart surgery on the same day.

"I'm just grateful that we were in the right place at the right time." ■